

*This newsletter is a collaboration between the Kentucky WIC Program and Lactation Improvement Network of Kentucky (LINK)*



Winter ■ 2015

# Kentucky Breastfeeding Newsletter



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## Text4Baby

The Text4Baby app makes it easy for mothers to get critical health and safety information. As a complementary tool to Text4Baby text messages, the free app offers additional content and interactive features that enhance the overall Text4Baby experience. The app is available in the iTunes and Google Play app stores.

Text4Baby officially launched the new free app version of the text message library for pregnant and new moms on Monday, November 10, 2014. The app is currently only in English but will be developed in Spanish in the future.

Features of the app include:

- A weekly planning list of medical, developmental, and lifestyle items;
- Appointment reminders that are set up through the application itself and received through the text message service; and
- Helpful health hotlines and community resources.

For more information, visit [www.text4baby.org](http://www.text4baby.org). This promotional flyer at: <https://www.text4baby.org/templates/bee20/images/2014/app%20flyer.pdf> can be shared with your clients.

Text4Baby has also partnered with Text2Quit to help pregnant, nursing, and postpartum mothers quit smoking.

Women are encouraged to enroll in Quit4Baby once they enroll in Text4Baby. The Text2Quit program has proven to be successful in a recent study published in the American Journal of Preventive Medicine: <http://www.ajpmonline.org/article/S0749-3797%2814%2900177-9/abstract>. In this study, Text2Quit was shown to double quit rates when compared to the control group.

[www.kybreastfeeding.com](http://www.kybreastfeeding.com)  
[www.breastfeedkentucky.com](http://www.breastfeedkentucky.com)  
<http://chfs.ky.gov/dph/mch/ns/breastfeeding>

# WIC Breastfeeding Data

The goals for Kentucky WIC are to:

1. increase to at least 75 percent the proportion of mothers who breastfeed their babies in the early postpartum period,
2. increase to at least 50 percent the proportion of mothers who continue breastfeeding until their babies are 6 months old, and
3. increase to at least 25 percent the proportion of mothers who breastfeed until their infants are 1 year old.

To assist local agencies in achieving this goal, WIC has re-introduced the 1596 report. This report provides breastfeeding statistics for infants enrolled in the clinic. The statistics are provided by the number of weeks, number of infants, percentage of infants, and percentage of all infants enrolled. The tables relate to any breastfeeding, currently breastfeeding, and currently/ever exclusively breastfed infants. All breastfeeding statistics are provided by primary race and ethnicity.

The 1679 report lists all infants that are on the 1596 report. A new report, 2001 Breastfeeding Exceptions report, has been developed to provide households where the mother and infant have a different status. Those families listed on this report should be reviewed to ensure that the status has been appropriately assigned.

The reports are released monthly and should be reviewed to determine current breastfeeding initiation and duration rates in the WIC population served as well as ensuring correct status assignment. An email was sent to the WIC Coordinators on October 3, 2014 with the breastfeeding report instructions.

If you have any questions about these reports please contact Marlene Goodlett at [Marlene.Goodlett@ky.gov](mailto:Marlene.Goodlett@ky.gov).

## Journal Review

***Pediatrics*, Published online December 1, 2014**

<http://pediatrics.aappublications.org/content/early/2014/11/25/peds.2014-1416>

Co-parenting Breastfeeding Support and Exclusive Breastfeeding: A Randomized Controlled Trial

***Pediatrics*, Published online December 1, 2014**

<http://pediatrics.aappublications.org/content/early/2014/11/25/peds.2014-1392>

Breastfeeding Duration and Weight Gain Trajectory in Infancy

***Journal of Human Lactation*, December 4, 2014**

<http://jhl.sagepub.com/content/early/2014/11/26/0890334414561265.abstract>

Use of Domperidone as a Galactagogue Drug: A Systematic Review of the Benefit-Risk Ratio

***Pediatrics*, Published Online December 1, 2014**

<http://dx.doi.org/10.1542/peds.2014-1532>

Early Weight Loss Nomograms for Exclusively Breastfed Newborns

***Breastfeeding Medicine*, December 30, 2014, Online First**

<http://online.liebertpub.com/doi/abs/10.1089/bfm.2014.0119>

Breastfeeding Outcome Comparison by Parity

***Journal of the Academy of Nutrition and Dietetics*, January 2015**

<http://dx.doi.org/10.1016/j.jand.2014.05.017>

Sustainable Weight Loss among Overweight and Obese Lactating Women Is Achieved with an Energy-Reduced Diet in Line with Dietary Recommendations

# FDA Issues Labeling Rule for Prescription Drugs

The U.S. Food and Drug Administration recently published a final rule that sets standards for how information about using medicines during pregnancy and breastfeeding is presented in the labeling of prescription drugs and biological products. The new content and formatting requirements will provide a more consistent way to include relevant information about the risks and benefits of prescription drugs and biological products used during pregnancy and breastfeeding.

The final rule replaces the current product letter categories – A, B, C, D and X – used to classify the risks of using prescription drugs during pregnancy with three detailed subsections that describe risks within the real-world context of caring for pregnant women who may need medication.

The final rule requires the use of three subsections in the labeling titled “Pregnancy,” “Lactation” and “Females and Males of Reproductive Potential.” The subsections provide details about use of the drug or biological product. The “Pregnancy” and “Lactation” subsections will also include three subheadings: “risk summary,” “clinical considerations” and “data.” These subheadings will provide more detailed information regarding human and animal data on the use of the drug, and specific adverse reactions of concern for pregnant or breastfeeding women, for example.

The detailed subsections must include a summary of the risks of using a drug during pregnancy and breastfeeding, a discussion of the data supporting the summary and relevant information to help

health care providers make prescribing and counseling decisions.

- The **Pregnancy** subsection will provide information relevant to the use of the drug in pregnant women, such as dosing and potential risks to the developing fetus. The subsection now requires information concerning a registry that collects and maintains data on how pregnant women are affected when they use the drug or biological product.
- The **Lactation** subsection will provide information about using the drug while breastfeeding, such as the amount of drug in breast milk and potential effects on the breastfed child.
- The **Females and Males of Reproductive Potential** subsection is now a consistent placement for information about pregnancy testing, contraception and about infertility as it relates to the drug.

This rule is part of a broad effort by the agency to improve the content and format of prescription drug labeling. It finalizes many of the provisions in the proposed rule that the FDA issued in May 2008, and will be in effect as of June 30, 2015. Once the final rule is in effect, newly approved drug and biological product applications will be required to use the new format immediately. The new labeling content and format requirements for previously approved products subject to the Physician Labeling Rule will be phased in gradually.

## Dates to Remember

**March 2, 2015**

**Application Deadline for IBLCE's exam in July 2015**

<http://iblce.org/>

**March 4, 2015**

**IBCLC Day**

[www.ilca.org](http://www.ilca.org)

**March 13-15, 2015**

**Philadelphia, PA**

**Lactation Consultant in Private Practice Workshop**

<http://www.lcinpp.com/>

**March 16-20, 2014**

**Lactation Counselor Training Course**

Louisville, KY

<http://www.centerforbreastfeeding.org/clc.htm>

**April 14, 2015**

**CDC/USBC Bi-Monthly Coalitions Webinars**

2:00—3:00 pm Eastern

[www.usbreastfeeding.org](http://www.usbreastfeeding.org)

# *Happy IBCLC Day*

## Wednesday March 4, 2015

IBCLC Day is celebrated to recognize the important role of the International Board Certified Lactation Consultant and the specialized knowledge each has to make a difference in the lives of breastfeeding mothers and babies.



This institution is an equal opportunity provider.  
WIC is a registered service of the U.S. Department of Agriculture  
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